

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Patriots Citizens Fund		FEC IDENTIFICATION NUMBER ▼ C C00540898	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee Creative Response Concepts [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014	
Mailing Address 2760 Eisenhower Ave. 4th FL		Amount 2800.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.276577
Purpose of Expenditure E-Marketing-Allocation of Retainer	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 21 / 2014	
Name of Federal Candidate Christopher Brian McDaniel		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: MS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Run-Off	

Full Name of Payee Active Engagement LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2014	
Mailing Address 44084 Riverside Parkway Ste. 350		Amount 500.00	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.276578
Purpose of Expenditure Copy Writing	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2014	
Name of Federal Candidate Christopher Brian McDaniel		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: MS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Run-Off	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	500.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Paul A Kilgore

[Electronically Filed]

Date

 MM / DD / YYYY
 06 / 22 / 2014

Signature